

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number		Repo (Mai	rt Filed E k X)	By Candida	te	×	Committee		Lobbyist
Name of Filing Committee, Candidate or Lobbyist		DANLENE A FEENEY							
Street Address		٠,7	600	5714NE	5×1	LET	-		
City			MIE	I CAROLINA I	PA	, , ,	Zip Code	16508 - 3	125
Type of Report (Place x under	report type)			AND THE PERSON NAMED IN THE PERSON	tions many	THE POWER	Control to the Project of the Section	CONTRACTOR SHIP SHOW SOME AND ADDRESS OF THE PARTY OF THE	
1- 6 th Tuesday 2- 2 nd Friday Pre-Primary Pre-Primary			Fuesday lection	5- 2 nd Friday Pre- Election	6- 30 D Electio	ay Post n	7- Annual	Special 2 nd Fridate Pre-Election	Special 30 Day Post-Election
					Х				
Date Of Election (MM/DD/YYYY)	11/07/2017	Year		2017	Amend Report			Termination Report	
Summary of Receipts and Expenditures	From Date		To Date	1			For	Office Use Only	
A. Amount Brought Forward I	From Last Report	\$	- 50	00.00					
B. Total Monetary Contribution (From Schedule I)	ons and Receipts	\$	10	01.21					
C. Total Funds Available (Sum of Lines A and B)		\$ - 348.79						5	2017
D. Total Expenditures (From Schedule III)			\$ 0			THE THE	2017 NOV		
E. Ending Cash Balance (Subtract Line D from Line C) F. Value of In-Kind Contribution	D	- 398.19 BB 3			SEKA				
(From Schedule II) G. Unpaid Debts and Obligation		\$		0				50.5	3 3
(From Schedule IV)	, ms	7	OF AGENCY AND THE TAX	Ü Milatin S				<u> </u>	<
Part 1- If this is a Committee repo					ndidate si				0
Sworn to and subscribed before me day of November All All Signature	e this	ned sch	edules or	paper, is to the l	/	Jan ignature	Cenel of Person Subm	A Lees itting report . Feeney	reg
My Commission expires 10 3 k JD19 MO. DAY YR.				_ <u>{</u> A	714 rea Code		()	866-24: time Telephone Num	5 3 ber
MARINE BALODELE PREPARAMINA MARIN	が根係Authorized Co	ommit	tee, candi	date shall sign he	re.				
I swear NoaTARIA tha នានុវត្ថិខ Ale best reheated Alexander, Notary P City of Erie, Erie County GOORNIASION STORMING OF IN R, PENNSYLVANIA ASSOCIATION OF IN	of my knowledge an ublic 로 소 화 IOTARIES	nd belie	ef this poli	tical committee h	as not vic	olated any	provisions of t	he Act of June 3, 193	7 (P.L. 1333, NO.320)
day of	20			_		Sign	ature of Candid	late	
Signature			.1	<u> </u>			Printed Name		
My Commission expiresMO.	DAY YR.			A	ea Code		Dayti	ime Telephone Numb	er

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer Identification Number	CONTRACTOR		STREET
	Every warr		-wear
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period (1)	\$	Ü	Harris
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)	\$	101.21	SECTION 1
All Other Contributions (Part B)	\$	0	
Total for the reporting period (2)	\$	101.21	
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)	\$	٥	E25,05310
All Other Contributions (Part D)	\$	0	
Total for the reporting period (3)	\$		
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)	-		
Total for the reporting period (4)	\$	Ó	
Total Monetary Contributions and Receipts during this reporting period (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)	\$	101.21	

PART A

Contributions Received From Political Committees

\$50.01 TO \$250.00 Use this Part to itemize only contributions received from Political Committees with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Filer Identificati	on Number	THE REPORT OF THE PARTY OF THE PARTY.	WWW.DOST.dos MACCADO	English Telegraphy (Section)	Martin Control of the		- CARRIAGAS	
Full Name of C		NAME OF THE OWNER,	STATE SET PROPERTY.		ACTUAL OF THE SECRETARIAN CO.		and the same	Amount
Full Name of Contributing COMMITTEE TO ELECT						Date [MM/DD/YYYY]	10001	
		DANLE	eme k	FEERE	l	11/25/2017		101:21
House #	Street Addre	ss Po	BOX	10713		Date [MM/DD/YYYY]	1000	
City	A solid section of	Caraca						
City	EMIE	State	PA	Zip Code	16514	Date [MM/DD/YYYY]	\$	
Full Name of Co	ontributing		A SHIDAY ORDERAN		Constitute of a second contract of the second	Date [MM/DD/YYYY]	\$	Marian era wastu wastuur laada
House #	Street Addres	SS				Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Co	intributing	MENN ROLL CONTRACT				Date [MM/DD/YYYY]	\$	
House #	Course Address							
nouse #	Street Addres	S				Date [MM/DD/YYYY]	\$	
City	DASA PSAGLIZONI DI SAN	State	271	Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Co Committee	ntributing	SWARE REAL				Date [MM/DD/YYYY]	\$	THE PERSON OF TH
House #	Street Address	S				Date [MM/DD/YYYY]	\$	
City		State	A STATE OF THE STA	Zip Code		Date [MM/DD/YYYY]	\$	
		4.565	Till y		l	SERVICE SERVICES CONTRACTOR OF THE SERVICES OF		
Full Name of Cor Committee	itributing					Date [MM/DD/YYYY]	\$	
House #	Street Address					Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
ull Name of Con Committee	itributing		-	new have	CONTROL OF STREET, ASSOCIATION	Date [MM/DD/YYYY]	\$	SERVED THE STATE OF THE SERVE
louse #	Street Address			<u> </u>		Date [MM/DD/YYYY]	\$	
ity		State	2	Zip Code		Date [MM/DD/YYYY]	\$	
			380		Å			

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identificatio	n Number:	CONTRACTOR OF THE STATE OF THE	and the express on a publishment of the property of the property of a second or a second	CALIFORNIA DE L'ANTINO DE L'AN	ARREST PROPERTY OF THE STATE OF
	INGINEEI.				
Daniel Petron Section 25				ig versiones i apparation (in appointant au demonstra in number a number a number a number and a number and an	and the second s
Full Name of Co	ntributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Co	intributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	-\$
Full Name of Co	ntributor			Date [MM/DD/YYYY]	
House #	Street Address			Date [MM/DD/YYYŸ]	.\$
City		State	Žip Code	Date [MM/DD/YYYY]	\$
Full Name of Cor	ntributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	200000000000000000000000000000000000000	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Con	itributor	PERSONAL PROPERTY.	The Control of	Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	(基)	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Con	tributor			Date [MM/DD/YYYY]	\$.
House #	Street Address			Date [MM/DD/YYYY]	\$.
City	The state of the s	State	Zip Code	Date [MM/DD/YYYY]	\$

PART C

Contributions Received From Political Committees

Over \$250.00

Use this Part to itemize only contributions received from Political Committees with an aggregate value over \$250.00 in the reporting period.

Filer Identifica	ation Number:	etale personal en en Marco de Meson		METATELEN SOM EN TERFONSINE FAMILIERUS SONS SONS ARTICLES OF SUPPLIES AND ANY SONS ENGLISHED	NATIONAL PROPERTY AND ADDRESS.
		Conclusives to expresse school expression		kapungan bahan padasakan pendan halampangan yang kalaban ang pendangan belawa anyak bakan separah bakan sebaga	TO THE RESIDENCE OF THE PROPERTY OF THE PARTY OF THE PART
Full Name of		DESCRIPTION OF THE PROPERTY OF THE PARTY OF		Date [MM/DD/YYYY] \$	PRODUCTION OF STREET,
Contributing	Committee				
House #	Street Addr	ress		Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of					
Contributing (Date [MM/DD/YYYY] \$	A SECONDARY CARL SAID AND A SECONDARY
House #	Street Addre				
	Jueer Adure	ess		Date [MM/DD/YYYY] \$	
City	Acceptance of the second	State	Zip Code	Date [MM/DD/YYYY] \$	
			2.10 00.10	Date [MM/DD/YYYY] \$	
Full Name of		THE PARTY OF THE P		Date [MM/DD/YYYY] \$	
Contributing C	Committee			January Commission of the Comm	
House #	Street Addre	ess		Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of					
Contributing C	ommittee			Date [MM/DD/YYYY] \$	l l
House #	Street Addres	SS		Date [MM/DD/YYYY] \$	
				Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] \$	- H
	NATIONAL AND ARTHUR STATE OF THE STATE OF TH	2.30			
Full Name of Contributing Co	ommittee.			Date [MM/DD/YYYY] \$	
House #	Street Addres	SS		Date [MM/DD/YYYY] \$	
City			by a size areas areas and		
alty		State	Zip Code	Date [MM/DD/YYYY] \$	
ull Name of				Date [MM/DD/YYYY] \$	a my parameter and the second
Contributing Co	mmittee			Date [MM/DD/YYYY] \$	
louse #	Street Address	ŝ		Date [MM/DD/YYYY] \$	
City	NA FARMING SHAPE	State	Zip Code	Date [MM/DD/YYYY] \$	
					\hat{h}

PART D

Filer Identification Number:

All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part C)

THE RESIDENCE OF THE PARTY OF T		PLACE TAXABLE THE DOLLER FAMILY COLUMN STRONG THE PLACE WHILE	anny taona ny ivone ao io ahaa y ao amin'ny ao amin'ny taona ao amin'ny taona ao amin'ny taona ao amin'ny taona	Color Color
Full Name of Contributor	THE PROPERTY OF THE PARTY OF TH	The first of the state and the surface of the surfa	Date [MM/DD/YYYY] \$	K119-0-11-17-09-4
			pare finish polyment	
House # Street Add	NID(ST)			
House # Street Add	ress		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name		1	Occupation	
Employer Mailing Address /				
Principal Place of Business				
Full Name of Contributor	POTENTIAL STATE ST	The Property of the Section of the Party Section of the Section of	Date [MM/DD/YYYY] \$	ATTACABLE CONTRACT
House # Street Addr			The land of the land	
House # Juleet Adul	ess		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name			Occupation	
Employer Mailing Address /				
Principal Place of Business				
Full Name of Contributor		BETTAL TANKS BETT DE NETHELSEN DAN EN FELLE ALGEBRE ATT EN EN EN EN	Date [MM/DD/YYYY] \$	阿里拉尔拉尔森安加亚
			5.5 Sec. 1	
House # Street Addr	2000 E		NEWS TAX TO SERVICE THE SERVIC	
House # Street Auur	ess		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
			\$5.50 [2.43]	
Employer Name		A CONTRACTOR OF THE PARTY OF TH	Occupation	
Employer Mailing Address /	97.25			
Principal Place of Business				
Full Name of Contributor		PMUCIPACION MARCONINI PROPINCI	Date [MM/DD/YYYY] \$	CETY CATELARISM

House # Street Addre	245			
House # Street Addre	ess		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
			The second secon	
Employer Name	[155.500]		Occupation	
Employer Mailing Address / Principal Place of Business				
Principal riace of business				

PART E

Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Filer Identification Number:

S to the transport of the state		OUT OF VIOLENCE ON THE PARK AND	COMPANION DE LA MANAGEMENT DE LA MANAGEMENT	OTHERS HAVE BY MITCH AND PROPERTY OF THE PROPE
Full Name		en/Page Charles Comments	eron is to end there can restinct play see	the distribution of the control of t
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			100-113020-2	
Full Name		th the one from the providence of those of the	er vill egit fræmt en han omstere vilkkende til kanara, sak skal	
House #	Street Address			
City	14.56	State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		PRODUCED KING	Common of productions	1921
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			ESTENCE .	
Full Name		end a mattrophicuser		eternisment og filmt Attention og sen omtot til i den gegettenen gode og kannen fri generalen i foregjeller, havfred
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				Judgeri
Full Name		entransamon de la lambio de la l		
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		311351360	1000 2400000 24	18549
Full Name				teneration tenerations and activities (4.1 per aurenticus cours teneral and another as on the Latin Estimation process).
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	r.	NAME TO ADD ADDRESS OF THE OWNER.	VEEDALT GREEN, EVAN, 120	

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

BUTIONS RECEIVED-VAL	JE OF \$50.00 OR LESS PER CONTRI	BUTOR
(1)	\$	
EIVED-VALUE OF \$50.01	TO \$250.00 (FROM PART F)	
(2)	\$	
VED-VALUE OVER \$250	00 (FROM PART G)	
(3)	\$	
	(1) (2) VED-VALUE OF \$50.01 (2) VED-VALUE OVER \$250. (3)	(2) \$ VED-VALUE OF \$50.01 TO \$250.00 (FROM PART F) VED-VALUE OVER \$250.00 (FROM PART G) (3) \$

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer Identificatio	n Number:	No service of the owner.	ed Antaras desirente de la companya	Control Control (Antonio por Edish Control of the Antonio of the A	
			APPRECIATION OF STATE ASSESSMENT OF STATE ASSESSMENT	and the part of the state of the entire of t	AND THE SEA ON A DOMESTIC SERVICE SERVICE SERVICES CONTRACTOR OF THE SERVICES SERVICES.
Full Name of Co	ontributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of C	Contribution				
Full Name of Co	ontributor	di an	CONTROL TO BUILD BUTTON ASSOCIATION OF THE PROPERTY OF	Date [MM/DD/YYYY]	\$
				Base filming systems	3
House #	Street Address			Date [MM/DD/YYYY]	\$
City	S. W. Chief S. Holes I.	State	Zip Code	Date [MM/DD/YYYY]	\$
Description of C	ontribution				8.
Full Name of Co	ntributor			Date [MM/DD/YYYY]	\$
				7 37 48	
House #	Street Address			Date [MM/DD/YYYY]	\$
City	(2000) (2000) (2000) (2000) (2000)	State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Co	ontribution		STATE OF THE TOTAL SCIENCE		(2-11)
Full Name of Cor	ntributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City /	1600 S 16	State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Co	ontribution		Mary Mary Mary		
Full Name of Con	ntributor	Constitution of the communications of	cet their side for a side to the control that were ready at Na Caberna	Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	,	State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Co	intribution				21

SCHEDULE II Part G

In-Kind Contributions Received

Filer Identification Number:	A STABLE STATES	VALUE OVER \$250	
Filer Identification Number:	er on the hand become particles		
CONTROL & CONTROL CONT	- Same was 27 and man	A	
Full Name of Contributor		And the second s	Date [MM/DD/YYYY] \$
House # Street Address			Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name	12 - 12 - 10 - 10 - 10 - 10 - 10 - 10 -		Occupation
Employer Mailing Address / Principal Place of Business			Description of Contribution
Full Name of Contributor		SOLIA SOCIETA SOLICIA	Date [MM/DD/YYYY] \$
House # Street Address			Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name			Occupation
Employer Mailing Address / Principal Place of Business			Description of Contribution
Full Name of Contributor	THE NEW YEAR AND STREET	personne de la EAS personagram de Maria De Maria persona de centra de la companya de la companya de Maria de Companya	Date [MM/DD/YYYY] \$
House # Street Address			Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name			Occupation
Employer Mailing Address / Principal Place of Business			Description of Contribution
Full Name of Contributor			Date [MM/DD/YYYY] \$
House # Street Address			Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name			Occupation
Employer Mailing Address / Principal Place of Business			Description of Contribution

Statement of Expenditures

NEWSTRAND STREET, WOLDS, CONTROL OF CASE AND ADDRESS OF CONTROL OF	
Filer Identification Number:	是一个人,我们就是一个人,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是
The identification (vulliber:	
· 公司的工作的证明,在1915年的中国的工作。1915年	
RESIDENCE PROPERTY AND PROPERTY OF THE PROPERT	THE STREET PROPERTY OF THE STREET, STR

To Whom Paid	d	THE STATE OF THE S		Date [MM/DD/YYYY] \$
House#	Street Address			Description of Expenditure
City		State	Zip	
			Code	
To Whom Paic	1			Date [MM/DD/YYYY] \$
House #	Street Address			Description of Expenditure
City		State	Zip Code	
To Whom Paid			阿克克斯 (1982年)	Date [MM/DD/YYYY] \$
House #	Street Address			Description of Expenditure
City		State	Zip Code	
To Whom Paid				Date [MM/DD/YYYY] \$
House #	Street Address			Description of Expenditure
City		State	Zip Code	
To Whom Paid				Date [MM/DD/YYYY] \$
House #	Street Address			Description of Expenditure
City		State	Zip Code	
To Whom Paid		Property attory	Self-resident de la companya de la compa	Date [MM/DD/YYYY] \$
House #	Street Address			Description of Expenditure
City	1 Sept 26 miles de l'appendique de l'Arthura I	State	Zip Code	
To Whom Paid			120 413-21 110 110 110 120 100 100 100 100 100 1	Date [MM/DD/YYYY] \$
House #	Street Address			Description of Expenditure
City	A STATE OF THE STA	State	Zip Code	
To Whom Paid			from the control of the control of the control of	Date [MM/DD/YYYY] \$
House #	Street Address			Description of Expenditure
City	Prophetical State (Charles)	State	Zip Code	

SCHEDULE IV

Statement of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Creditor				Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip	
Description of D)ebt		Code	
Name of Credito	or	hadings and sign from our feature had formative the conductor of the condu		Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City Description of D		State	Zip Code	
				_105001
Name of Credito				Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City Description of De		State	Zip Code	
Description of De				I ances
Name of Creditor		NOVEL - SEE SEAT NOVEL SEASONS PROPERTY AND	Andrews (co. 61 february) (Co. 20 february) (Co. 20 february) (Co. 20 february)	Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City Description of De		State	Zip Code	
Name of Creditor			AT DESTRUCTION AND ARTHUR LEGISLAND ADMINISTRATION OF THE PERSON AND ADMINISTRATION OF THE PERSON A	Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$.
City Description of Del		State	Zip Code	
				I down
Name of Creditor			participations that out also access apparents and 4 data in resistance as 4	Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
lity		State	Zip	